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RICHARD W. WIEKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

TANICIA BENJAMIN

Plaintiff,

vs.

LAWSON ROOFING CO.

Defendant.

CASE NO. _____

APPLICATION TO PROCEED
IN FORMA PAUPERIS

SI

I, TANICIA BENJAMIN, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ☒ No ☐

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: 1369.20 Net: 1034.31
Employer: JELICIA BENJAMIN PO BOX 700
RANCHO CORDOVA CA 95741-0700

If the answer is "no," state the date of last employment and the amount of the gross and net salary

1 and wages per month which you received.

2
3
4
5 2. Have you received, within the past twelve (12) months, any money from any of the
6 following sources:

- 7 a. Business, Profession or Yes ___ No ☒
8 self employment?
- 9 b. Income from stocks, bonds, Yes ___ No ☒
10 or royalties?
- 11 c. Rent payments? Yes ___ No ☒
12 d. Pensions, annuities, or Yes ___ No ___
13 life insurance payments?
- 14 e. Federal or State welfare payments, Yes ☒ No ___
15 Social Security or other govern-
16 ment source?

17 If the answer is "yes" to any of the above, describe each source of money and state the amount
18 received from each.

19 WELFARE PAYMENTS \$771.00 MO.
20 SOCIAL SECURITY \$639.00 MO.

21 3. Are you married? Yes ___ No ☒

22 Spouse's Full Name: _____

23 Spouse's Place of Employment: _____

24 Spouse's Monthly Salary, Wages or Income:

25 Gross \$ _____ Net \$ _____

26 4. a. List amount you contribute to your spouse's support: \$ _____

27 b. List the persons other than your spouse who are dependent upon you for support
28 and indicate how much you contribute toward their support. (NOTE: For minor

children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.)

M.B. 17 V.G. 15 L.C. 11

5. Do you own or are you buying a home?

Yes ___ No ☒

Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

6. Do you own an automobile?

Yes ___ No ☒

Make _____ Year _____ Model _____

Is it financed? Yes ___ No ___ If so, Total due: \$ _____

Monthly Payment: \$ _____

7. Do you have a bank account? Yes ☒ No ___ (Do not include account numbers.)

Name(s) and address(es) of bank: BANK OF AMERICA
PO BOX 37176 SAN FRANCISCO CA 94137-0001

Present balance(s): \$ LESS THAN \$400.00

Do you own any cash? Yes ___ No ☒ Amount: \$ _____

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes ___ No ☒

8. What are your monthly expenses?

Rent: \$ 415.00 Utilities: 200.00

Food: \$ 600.00 Clothing: 1000.00 +

Charge Accounts:

Name of Account	Monthly Payment	Total Owed on This Account
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

9. Do you have any other debts? (List current obligations, indicating amounts and to whom they are payable. Do not include account numbers.)

DLANE BENJAMIN (MAY) 1000.00

10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ___ No ✓

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

APRIL 8, 2008

DATE

[Signature]
SIGNATURE OF APPLICANT